

**Disposition of Unspent Contributions****Reporting Form for Candidates (NRS 294A.180)****State of Nevada****BEFORE COMPLETING THIS FORM, PLEASE READ THE REQUIREMENTS ON PAGE TWO**

(This page may be copied or duplicated if additional space is needed, but all pages must be attached when the report is filed.)

**NOTE: Any person who willfully violates the filing requirements is subject to a civil penalty of not more than \$5,000 for each violation and payment of court costs and attorney's fees!**

Pd 1 Holder 6 6  
 Name (print) Office Held District

**DATE OF THIS REPORT:**☐ 15th day of the second month after  
his election if contributions remain☐ 15th day of the second month after  
his defeat if contributions remain**BEGINNING BALANCE OF UNSPENT CAMPAIGN****CONTRIBUTIONS AS OF JANUARY 1, 2001: \$** 6**EXPLANATION OF DISPOSITION****(This report should reflect any remaining campaign contributions from your previous election cycle only.)**

AMOUNT:	DISPOSITION:
\$	
\$	
\$	
\$	
\$	
\$	
\$	
\$ <u>6</u>	<u>6</u>

 RECEIVED  
 CITY CLERK  
 JUN 11 - 6 A 9:2
**REMAINING BALANCE OF UNSPENT CAMPAIGN CONTRIBUTIONS: \$** \_\_\_\_\_

I do hereby swear (or affirm) under penalty of perjury that the assertions contained in this report are true

this 7-6-01 day of \_\_\_\_\_, \_\_\_\_\_Signature of Public Officer 6Name of Public Officer 6Street Address 6Mailing Address if Different 6City and State 6

Zip Code

Daytime Telephone Number

Total number of pages for this report 6

Office Use Only